



PTO/SB/21 (05-03)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/033,663
	Filing Date	12/26/01
	First Named Inventor	Iosif R. Korsunsky
	Art Unit	2839
	Examiner Name	ABRAMS, NEIL
	Attorney Docket Number	
Total Number of Pages in This Submission		9

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="text-align: center; border: 1px solid black; padding: 5px; margin-top: 10px;"> REQUEST FOR CHECK RETURN </div>
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Wei Te Chung Foxconn International, Inc.
Signature	
Date	July 14, 2004

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Wei Te Chung
Signature	
Date	July 14, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 422 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	Examiner:
Korsunsky, Iosif)	Abrams, N
)	
Serial No.: 10/033,663)	Group Art Unit: 2839
)	
Confirmation No.: 7938)	Dated: July 14, 2004
)	
Filed: 12/16/01)	
)	
For: MODULAR JACK)	

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence is being
 facsimile transmitted Commissioner for Patents,
 P.O. Box 1450, Alexandria, VA 22313-1450, on this
 at (703)746-4000

Signed:

Wei Te Chung

REQUEST FOR CHECK RETURN

Honorable Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

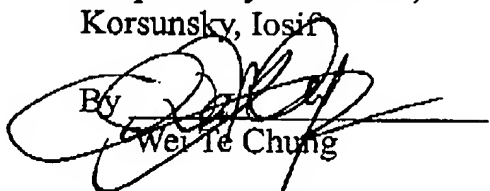
Dear Sir/Madam:

- (1) The above-identified application was abandoned as indicated by the attached **EXPRESS ABANDONMENT** UNDER 37 CFR 1.138 which was faxed to the Pre-Grant Publication Division at (703) 305-8568 on 07/08/04 (*Attachment A*). USPTO received the Express Abandonment Request on 07/08/04 and mailed out Express Abandonment Notice on 07/13/04. (*Attachment B*)
- (2) Applicant **mistakenly** submitted the issue fee on 07/08/04 with the check number 1324 for \$1630. The copies of the issue fee transmission and the check are shown as *Attachment C*. Anyhow, it was a **false submission** and Applicant has stopped payment of the check for the related checking account in the bank.



- (3) It is respectfully requested that the falsely submitted check be returned to Applicant by PTO so as to avoid improperly/falsely cashing in the future.
- (4) Applicant apologizes for any inconvenience to PTO caused by this false submission of the issue fee.

Respectfully submitted,
Korsunsky, Iosif

By 
Wei Te Chung

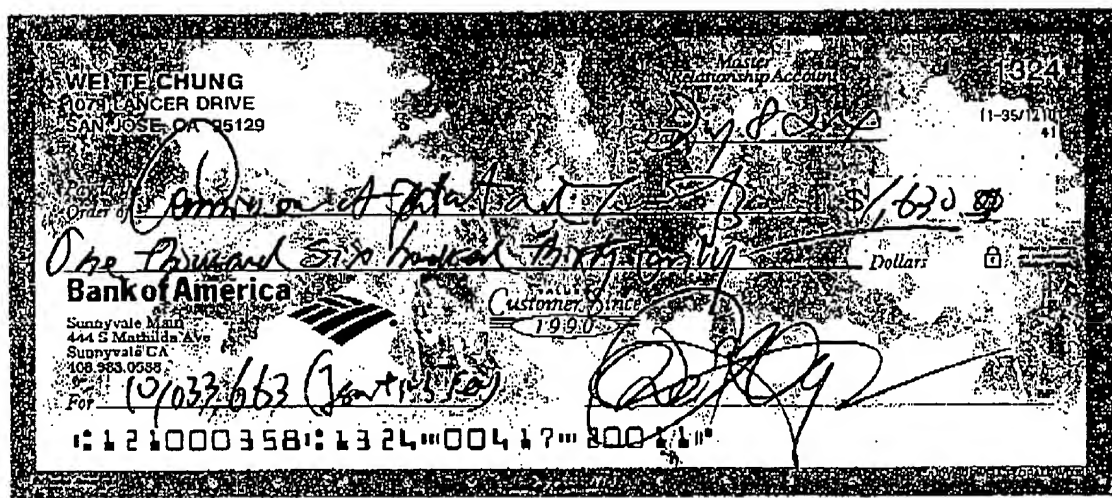
Registration No.: 43,325
Foxconn International, Inc.
P. O. Address: 1650 Memorex Drive,
Santa Clara, CA 95050
Tel No.: (408) 919-6137

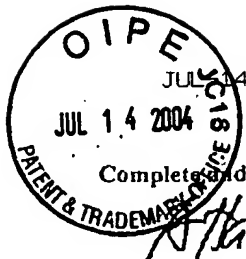


JUL-14-2004 17:00

FOXCONN

408 919 8353 P.09





JUL 14-2004 16:59

FOXCONN

408 919 8353 P.08

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Name: Legibly mark-up with any corrections on one Block 1)

25859 7590 04/08/2004

WEI TE CHUNG
FOXCONN INTERNATIONAL, INC.
1650 MEMOREX DRIVE
SANTA CLARA, CA 95050

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

WEI TE CHUNG	(Depositor's name)
<i>[Signature]</i>	(Signature)
04/08/2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/033,663	12/26/2001	Iosif Korsunsky		7938

TITLE OF INVENTION: MODULAR JACK WITH REPLACEABLE COMPONENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	07/08/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
ABRAMS, NEIL	2839	439-620000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. WEI TE CHUNG
2.
3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

HON HAI PRECISION IND. CO., LTD.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

TAIPEI HSIEN, TAIWAN

Please check the appropriate assignee category or categories (will not be printed on the patent);

☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee
- ☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

WEI TE CHUNG

(Date)

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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